Case 16-15666 Doc 1 Fill in this information to identify your case:	Filed 05/09/16	Entered 05/09/16 09:19:31	Desc Main
Fill in this information to identify your case:		age 1 of 74	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7		
	Chapter 11		
	Chapter 12		Check if this is an
	✓ Chapter 13		amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	<u>Christina</u> First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name  Manzanales  Last name	Middle name  Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- <u>3170</u>	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Doc 1 Filed 05/09/16s Entered 05/09/16 09:19:31 Desc Main Debtor 1 Page 2 of 74 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 8610 S Burnham Ave Number Street Number Street Apt 2nd Floor Front 60617 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. 8422 S Buffalo Number Street Number Street Apt 1st Floor Chicago Illinois 60617 City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this district to file for Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/166s Entered 05/09/16/09/19:31 Desc Main

Document Document Page 3 of 74 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 3/24/2015 Case number MM / DD / YYYY District When Case number District \_\_\_\_\_ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YYYY you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Doc 1 Filed 05/09/126s Entered 05/09/16/09:19:31 Desc Main Debtor 1 Page 4 of 74 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City Zip Code

State

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Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

## **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

You must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of

realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Doc 1 Filed 05/09/126s Entered 05/09/16/09:19:31 Desc Main Page 6 of 74 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Christina Manzanales Signature of Debtor 2 Signature of Debtor 1 Executed on 5/9/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

_/s/ Michael Spangler 6310219 Signature of Attorney for Debtor		Date	5/9/2016 MM / DD / YYYY	
Michael Spangler 6310219 Printed name				
Semrad Law Firm				
Firm name				
Street				
City	State		Zip Code	
Contact phone		E	mail address	
Bar number			tate	

Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main Fill in this information to identify your case: Debtor 1 Christina Manzanales First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$1,450.00 1b. Copy line 62, Total personal property, from Schedule A/B ...... \$1,450.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$46.031.21 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$46,031.21 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2.066.04 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,874.00

De	obtor 1 Christin Case 16-15666 Doc 1 Filed 05/109/11/6s Entered 05/109/11/6/109/119:31 Desc Main
	First Name Middle Name Documer Page 9 of 74
Par	t4: Answer These Questions for Administrative and Statistical Records
6. 🗸	Are you filing for bankruptcy under Chapters 7, 11, or 13?
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
	✓ Yes.
7. \	What kind of debt do you have?
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
R	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,433.51
0.	Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

copy the following	special categories of claims from Fart 4, line of of Schedule 17.	
From Part 4 on Sch	edule E/F, copy the following:	Total claim
9a. Domestic support	t obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain	other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death of	or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (C	opy line 6f.)	\$20,753.00
9e. Obligations arising priority claims. (Copy	g out of a separation agreement or divorce that you did not report as $\prime$ line 6g.)	\$0.00
9f. Debts to pension	or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
9g. <b>Total.</b> Add lines 9	9a through 9f.	\$20,753.00

	Case 16-15666	Doc 1	Filed 05/09/16	Entered 05/09/16	09:19:31 E	Desc Main
Fill in this i	information to identify your case:	:				
Debtor 1	Christina		Manz	zanales		
	First Name	Middle	Name Last N	Name		
Debtor 2 (Spouse, it	f filing) First Name	Middle	Name Last N	Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of I			
Case num (If known)	ber		(	State)		
Officia	I Form 106A/B					Check if this is an amended filing
Sched	dule A/B: Prope	rty				12/1
esponsibl rrite your Part 1:	where you think it fits best. Be le for supplying correct informane and case number (if kno Describe Each Resident own or have any legal or equ	mation. If more sown). Answer evece, Building,	space is needed, attach ery question. Land, or Other Rea	a separate sheet to this forn	n. On the top of any	additional pages,
<b>✓</b>	No. Go to Part 2					
	Yes. Where is the property?					
1.1	Street address, if available, or o	other description	What is the property Single-family home	е	the amount of any s	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	offeet address, if available, of e	otrici description	Duplex or multi-un	•	Current value of	, ,
			Condominium or o	•	entire property?	portion you own?
			Land	iobile nome		
	Number Street		Investment propert	V		re of your ownership
			Timeshare	,	interest (such as the entireties, or	fee simple, tenancy by a life estate), if known.
	City State	Zip Code	Other			
			Debtor 1 only Debtor 2 only Debtor 1 and Debt	in the property? Check one. or 2 only debtors and another	Check if this (see instructi	is community property ons)
				ou wish to add about this iter	n, such as local	
lf vou c	own or have more than one, list he	ere.	property identification	on number:		
,	with of the terminal and the training the tr	010.	What is the property		Do not deduct secu	ured claims or exemptions. Put secured claims on Schedule D:
1.2	Street address, if available, or o	other description	<ul><li>Single-family home</li><li>Duplex or multi-un</li></ul>		Creditors Who Ha	ve Claims Secured by Property.
			Condominium or communication Manufactured or m	•	Current value of entire property?	the Current value of the portion you own?
	Number Street		_ Land		Describe the natu	re of your ownership
	Trained Circuit		Investment propert	y	interest (such as	fee simple, tenancy by
	City State	Zip Code	Other		the entireties, or a	a life estate), if known.
			Debtor 1 only Debtor 2 only Debtor 1 and Debt	in the property? Check one. or 2 only debtors and another	Check if this (see instructi	is community property ons)

Other information you wish to add about this item, such as local property identification number:

	Christin Case 16-156 First Name	66 Doc 1  Middle Name	Filed 05/09/126s Entered 05/09/126	009:49:31 Des	sc Main
1.3 Str	eet address, if available, or ot		Documes in the Page 11 of 74  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
Nu Cit	mber Street y State	Zip Code	Land Investment property Timeshare Other	Describe the nature or interest (such as fee sthe entireties, or a life	imple, tenancy by
		[ [ [	Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, property identification number:	(see instructions)	mmunity property
			l of your entries from Part 1, including any entries f		
Dort 2:	Dosariba Your Vahiole	ne.			
Do you o you own t 3. Cars, v	hat someone else drives. If you ans, trucks, tractors, sport utili o	<b>equitable interest in</b> I lease a vehicle, also	any vehicles, whether they are registered or not? In preport it on Schedule G: Executory Contracts and Unexpoles		
Do you o you own th 3. Cars, v \times N	wn, lease, or have legal or enter that someone else drives. If you ans, trucks, tractors, sport utilion	<b>equitable interest in</b> I lease a vehicle, also	preport it on Schedule G: Executory Contracts and Unexp	Do not deduct secured the amount of any secur	claims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  \$450.00

ebtor 1	Christin Case 16-15666	Filed 05/09/126s Entered 05/09/126	6/09/19: <u>31 Des</u>	CIVICIII
0.0	First Name Middle Name	Document Page 12 of 74	D	
3.3	Make	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put ed claims on <i>Schedule D:</i>
	Model: Year:	Debtor 1 only	•	ims Secured by Property.
	Approximate mileage:		Orcanors who have old	iins occured by 1 reperty.
		Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		<del></del>
		Check if this is community property (see		
		instructions)		
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put
	Model:	one.	the amount of any secure	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		<del></del>
		Check if this is community property (see		
		instructions)		
		her recreational vehicles, other vehicles, and access aft, fishing vessels, snowmobiles, motorcycle accessories		
Exa	mples: Boats, trailers, motors, personal watercra No Yes Make	aft, fishing vessels, snowmobiles, motorcycle accessories  Who has an interest in the property? Check	Do not deduct secured cl	•
Exa	mples: Boats, trailers, motors, personal watercra  No  Yes  Make  Model:	who has an interest in the property? Check one.	Do not deduct secured cl the amount of any secure	ed claims on <i>Schedule D:</i>
Exa	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year:	who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cl the amount of any secure	•
Exa	mples: Boats, trailers, motors, personal watercra  No  Yes  Make  Model:	who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property.  Current value of the
Exa	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property.
Exa	mples: Boats, trailers, motors, personal watercra  No  Yes  Make  Model:  Year:  Approximate mileage:	who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property.  Current value of the
Exa	mples: Boats, trailers, motors, personal watercra  No  Yes  Make  Model:  Year:  Approximate mileage:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: nims Secured by Property.  Current value of the
4.1	mples: Boats, trailers, motors, personal watercra  No  Yes  Make  Model:  Year:  Approximate mileage:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D: hims Secured by Property.  Current value of the portion you own?
4.1	Moles: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clat Current value of the entire property?	ed claims on Schedule D: hims Secured by Property.  Current value of the portion you own?
4.1	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure.	d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put
4.1	Make Model: Other information:  Make Model:  Make Model:  Make Model:  Model:  Model:  Model:  Model:  Model:  Model:  Model:  Model:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Classifications	d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ded claims on Schedule D: hims Secured by Property.
4.1	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure.	d claims on Schedule D: nims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put de claims on Schedule D:
4.1	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the	d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ded claims on Schedule D: hims Secured by Property.  Current value of the
4.1	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the	d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ded claims on Schedule D: hims Secured by Property.  Current value of the
4.1	mples: Boats, trailers, motors, personal watercra  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage:  Other information:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property?  Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property?	d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?  daims or exemptions. Put ded claims on Schedule D: hims Secured by Property.  Current value of the

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/126s Entered 05/09/126 O9/129:31 Desc Main
First Name Document Page 13 of 74

Part 3: Describe	Your Personal and Household Items	
Do you own or h	ave any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Household good	s and furnishings	
_	pliances, furniture, linens, china, kitchenware	
No		
Yes. Describe	Used Furniture	<b>#250.00</b>
		\$350.00
7. Electronics Examples: Television	ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
<b>✓</b> No		
Yes. Describe		
_		
	and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; oin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No		
Yes. Describe		
	ports and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments	
<b>✓</b> No		
Yes. Describe		l
10. Firearms Examples: Pistols, ri	fles, shotguns, ammunition, and related equipment	
✓ No		
Yes. Describe		
11. Clothes Examples: Everyday No	clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	Used Clothing	\$500.00
_		\$300.00
gold, silv	jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er	
✓ No		
Yes. Describe		
13. Non-farm anima Examples: Dogs, ca		
✓ No		d d
Yes. Describe		
	nal and household items you did not already list, including any health aids you did not list	
✓ No		1
Yes. Describe		
	alue of all of your entries from Part 3, including any entries for pages you have attached	\$850.00

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/166s Entered 05/09/16 (09/19:31 Desc Main

st Name Middle Name Docunteriname Page 14 of 74

them

**Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Global Prepaid Debit \$0.00 17.2. Checking account: Rapid Refund Prepaid Debit \$0.00 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about

Deb	tor 1		-15666	Doc 1					609v19: <u>31</u>	Desc Main	_
		First Name		Middle Name	Docume		Page 15 (				
20.	<ol> <li>Government and corporate bonds and other negotiable and non-negotiable instruments         Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.         Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.     </li> </ol>										
		No Yes. Give specific information about them	Issuer name	:							
		u1011									—
21.	Exa	rement or pension mples: Interests in IR. No		eogh, 401(k), 40	3(b), thrift saving	s account	s, or other pen	sion or profit	-sharing plans		
	Ħ	Yes. List each	Type of acco	ount:	Institution	name:					
		account separately.	401(k) or sir	milar plan:							_
			Pension plan	n:							_
			IRA:								
			Retirement a	account:							
			Keogh:								_
			Additional ad	ccount:							_
			Additional ad	ccount:							
22.	Your Exam com	urity deposits and p share of all unused d mples: Agreements w panies, or others No	eposits you ha	ave made so tha					S		
	$\overline{\mathbf{V}}$	Yes			Institution	name:					
			Electric:								_
			Gas:								_
			Heating oil:								_
			Security dep	osit on rental ur	nit: Security D	Deposit wi	th Landlord			<u>\$150.00</u>	
			Prepaid rent	:							—
			Telephone:								
			Water:							_	_
			Rented furni	iture:							_
			Other:								_
23.	Ann	uities (A contract for No				life or for	a number of ye	ears)			
		Yes	Issuer name	and description	n:						

Debte	or 1	Christina 6	ase 1	6-15666	Doc 1		<u>05//99/12/6s</u> cum <del>le</del> tht <sup>me</sup>			6 ( <b>09</b> v49: <u>31</u>	Des	c Main
24.				<b>ition IRA, in a</b> ), 529A(b), and		a qualifie	d ABLE prograr	n, or under a	qualified stat	te tuition program.		
		No Yes	Institution	on name and d	escription. Sep	parately file	the records of ar	ny interests.11	U.S.C. § 521(	c):		
25.		sts, equita rcisable fo No Yes. Desc	or your l		ts in property	(other the	an anything list	ed in line 1),	and rights or	powers		
26.	Еха	ents, copy	rrights, t				intellectual pro yalties and licens		ts			
27.			ding per	, and other ge mits, exclusive			ssociation holding	gs, liquor licen	ses, professio	nal licenses		
Mon	iey (	or prope	erty ov	ved to you?	?						<b>po</b> Do	rrent value of the rtion you own? not deduct secured ms or exemptions.
28.	<b>✓</b>	Yes. Give s about you a	specific in them, ir lready fil		er					Federal: State: Local:	-	
	Exar	nily suppor nples: Past No		ump sum alimo	ny, spousal su	oport, child	support, mainter	nance, divorce	settlement, pro		-	
			pecific ii	nformation						Alimony:  Maintenance:  Support:  Divorce settlement  Property settlement	=	
	Exar	<i>nples:</i> Unpa	aid wage al Secur	one owes you es, disability ins ity benefits; unp	urance payme		ity benefits, sick pomeone else	pay, vacation p	ay, workers' co	mpensation,		

Debt	tor 1	Christin Case 16 First Name	6-15666	Doc 1 Middle Name	Filed 05/04 Documen		Entered Page 17 c		16/09:19: <u>31</u>	Des	c Main
31.		rests in insurance   mples: Health, disabi		ance; health			Ū		r's insurance		
		No Yes. Name the insura of each policy and lis			Company name:				Beneficiary:		Surrender or refund value:
32.	If you	interest in property u are the beneficiary erty because someon No Yes. Describe	of a living trust				olicy, or are curr	rently entitle	d to receive		
33.	Exar	ms against third pa mples: Accidents, em					ide a demand f	for paymer	nt		
34.	_	Yes. Describe er contingent and	unliquidated	claims of ev	ery nature, includ	ling cou	nterclaims of t	the debtor	and rights	_	
J4.	to s	et off claims  No Yes. Describe	umquateu	Ciainis Oi ev	ery mature, moruo	iiiig cou	mercialins of t	the debtor	and rights		
35.	<b>✓</b>	financial assets yo No Yes. Describe	u did not alrea	ady list							
36.		the dollar value of Part 4. Write that nu	-			-					\$150.00
Part	5:	Describe Any B	susiness-Re	elated Pro	perty You Own	or Ha	ve an Intere	est In. Lis	st any real estat	e in P	art 1.
37.	Do y	ou own or have an	ıy legal or equ	itable intere	st in any busines	s-related	I property?				
		No. Go to Part 6. Yes. Go to line 38.								<b>por</b> Do	rrent value of the tion you own? not deduct secured claims exemptions
38.	<b>✓</b>	ounts receivable or No Yes. Describe	commissions	s you alread	y earned						
39.		ce equipment, furn nples: Business-rela			odems, printers, cop	oiers, fax	machines, rugs	s, telephone	es, desks, chairs, elec	tronic de	evices
		No Yes. Describe								_	

		Christinase 16 First Name		Doc 1	Document Mitter	<u>Entered</u>	<b>16</b> 09:19: <u>31    D</u>	esc Main
40.	Mac	hinery, fixtures, eq	uipment, sup	plies you us	se in business, and tools	of your trade		
	<b>✓</b>	No						
		Yes. Describe						
41.	Inve	entory						
	<b>✓</b>	No						
		Yes. Describe						<u> </u>
42.	Inte	rests in partnershi	ps or joint ve	entures				1
	<b>✓</b>	No						
		Yes. Give specific			Name of entity:		% of ownership:	
		information about						
		them						
43. <b>(</b>	Custo	omer lists, mailing	lists, or othe	r compilatio	ns			
	<b>V</b>	_		•				
	=		clude personal	lly identifiable	e information (as defined in	11 U.S.C. § 101(41A))?		
	_	_	·	•	,	· , ,,		
		∐ No	9					
		Yes. Descri	ibe					
44.	Any	business-related p	roperty you o	did not alrea	dy list			
	<b>✓</b>	No						
		Yes. Give specific						
		information						<u> </u>
15 A	dd th	e dollar value of al	l of your entr	ies from Par	rt 5. including any entries	s for pages you have attach	ned	
			-					
Part	6:	Describe Any F	arm- and (	Commerci mland, list it in	ial Fishing-Related F	Property You Own or I	lave an Interest In	
46.	Do	you own or have a	ny legal or eq	uitable inter	rest in any farm- or comn	nercial fishing-related prop	erty?	
	<b> </b>	No. Go to Part 7.						Current value of the
	Ħ	Yes. Go to line 47.						portion you own?  Do not deduct secured
								claims
4	_							or exemptions
47.		<b>m animals</b> <i>mpl</i> es: Livestock, pou	ultry, farm-raise	ed fish				
	_		<i>y,</i>	-				
		No Yes. Describe						1
	Ш	103. DESCIIDE						

Deb	tor 1	Christin Case 16-156 First Name	Middle Name		<u>Entered</u>	Desc	Main
48.	Cro	ps-either growing or harv	rested	Document	rage 13 or 74		
	<b>✓</b>	No					
		Yes. Describe					
49.	Farr	m and fishing equipment,	implements, machi	nery, fixtures, and tools	of trade		
	<b>✓</b>	No					
		Yes. Describe					
50.	Farr	n and fishing supplies, ch	nemicals, and feed				
	<b>✓</b>	No					
		Yes. Describe					
51.	Anv	farm- and commercial fis	hing-related propert	v vou did not already lis			
•		No	g .e.a.ea p.epe	,, , ,	-		
		Yes. Describe					
					or pages you have attached		
or P	art 6.	Write that number here			<b>&gt;</b>		
Part	7:	Describe All Property	You Own or Ha	ve an Interest in Th	at You Did Not List Above		
53.		ou have other property of		ot already list?			
	Exar <b>✓</b>	mples: Season tickets, countr	y club membersnip				
	_	No Yes. Give specific					
		information					
54. A	dd th	e dollar value of all of you	r entries from Part 7	7. Write that number here	9	.▶	
Dord	0	list the Totals of Foo	sh Dont of this F				
Part	8:	List the Totals of Eac	n Part of this Fo	orm			
55. <b>F</b>	Part 1	: Total real estate, line 2			<b>&gt;</b>		
56. <b>p</b>	oart 2	total vehicles, line 5		\$450.00			
57. <b>P</b>	art 3:	Total personal and house	ehold items, line 15	\$850.00			
58. <b>P</b>	art 4:	Total financial assets, line	e 36	\$150.00			
59. <b>F</b>	Part 5	: Total business-related p	roperty, line 45	<u> </u>			
60. <b>F</b>	Part 6	: Total farm- and fishing-	related property, line	= 52			
61. <b>F</b>	Part 7	: Total other property not	listed, line 54				
62. 1	Γotal	personal property. Add line	es 56 through 61	\$1450.00			+ \$1450.00
			-	ψ1450.00	Copy personal property to	otal <b>&gt;</b>	Ι ΨΙΤΟΟ.ΟΟ
							\$1450.00
63. <b>T</b>	otal c	of all property on Schedule	e A/B. Add line 55 + li	ine 62			

Fill i	n this inform	Case 16-15666 ation to identify your case:	Doc 1	Filed 05/	09/16 Enter	red 05/09/	/16 09:19:31	Desc Main
Deb		Christina			Manzanales			
	tor 2	First Name First Name		Name Name	Last Name  Last Name			
		ankruptcy Court for the:	Northern		istrict of Illinois			
	e number lown)				(State)			
Off	ficial F	orm 106C						Check if this is a amended filing
		e C: The Prop	erty Yo	u Claim	as Exemp	t		12/1
For s to exer exer exer orop	each item o state a s mpted up vive certa mption of perty is d  1: Ident Which set Vou ar You ar	pecific dollar amou to the amount of a in benefits, and tax	aim as exempny applicable-exempt retitivalue under that amount the	npt, you must. Alternative e statutory frement funder a law that nt, your exempt ek one only, ever exemptions. 11 is 522(b)(2)	st specify the arely, you may classimit. Some exected with some exected may be unlisted the exemmption would be a fif your spouse is filir U.S.C. § 522(b)(3)	mount of the aim the full emptions—s imited in do nption to a poe limited to	fair market valusuch as those fo ollar amount. Ho particular dollar o the applicable s	claim. One way of doing so e of the property being r health aids, rights to wever, if you claim an amount and the value of the statutory amount.
		ription of the property a lle A/B that lists this pro		nt value of ortion you	Amount of the exe			cific laws that allow exemption
			Copy t	he value from lule A/B				
	Brief description	1996 Oldsmobile Bravada	\$	450.00	<b>✓</b>	\$450.00	_	735 ILCS 5/12-1001(c)
	Line from Schedule A	/B: <u>03</u>			100% of fair ma	arket value, up to	o any	
	Brief description	: Global Prepaid Deb	oit	\$0.00	П			735 ILCS 5/12-1001(b)
	Line from Schedule A	/B: <u>17</u>			100% of fair ma applicable statu	arket value, up to utory limit	o any	
3.	(Subject to	aiming a homestead exe adjustment on 4/01/19 and id you acquire the property	every 3 years a	fter that for case	s filed on or after the o	•	,	

No Yes

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rar	tz: Additional Page						
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own  Copy the value from Schedule A/B		exemption you claim box for each exemption.	Specific laws that allow exemption	
	Brief description: Line from Schedule A/B:	Rapid Refund Prepaid  Debit  17	\$0.00		market value, up to any	735 ILCS 5/12-1001(b)	
	Brief description:	Security Deposit with Landlord	\$150.00	<b>Z</b>	\$150.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: Brief	22		applicable s	market value, up to any statutory limit	735 ILCS 5/12-1001(b)	
	description: Line from Schedule A/B:	Used Furniture  06	\$350.00		\$350.00 market value, up to any tatutory limit		
	Brief description:	Used Clothing	\$500.00	<b>~</b>	\$500.00	735 ILCS 5/12-1001(a)	
	Line from Schedule A/B:	11			market value, up to any		

Fill in this informa	Case 16-15666 ation to identify your case:		Filed 05/09/16	Entered 05/09/	/16 09:19:31	Desc Main			
Debtor 1	Christina First Name	Middle N	Manza ame Last N						
Debtor 2 (Spouse, if filing)	First Name	Middle N	ame Last N	ame					
	nkruptcy Court for the:	Northern	District of Illi	inois State)					
(If known)	Case number (If known)  Check if this is an								
	Official Form 106D  Schodule D: Creditors Whe Have Claims Secured by Property								
Be as comple correct inforr	ete and accurate as mation. If more space top of any addition	possible. If tw ce is needed,	o married people	are filing together al Page, fill it out,	, both are equally	y responsible for			
No. Ch	ditors have claims secuneck this box and submit the lill in all of the information b	is form to the court	•	s. You have nothing else	to report on this form.				
Part 1: List A	All Secured Claims								
claim. If mor	ured claims. If a creditor he than one creditor has a the claims in alphabetica	particular claim, list	the other creditors in Pa	•	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		

Ell in	41-i i f	Case 16-15666		05/09/16	Entered 05	<u>/0</u> 9/16 09:19:31	Desc	Main	
FIII IN	tnis informa	ation to identify your case	<u> </u>		goo				
Debto	or 1	Christina		Manza	anales				
		First Name	Middle Name	Last N					
Debto	or 2								
(Spou	se, if filing)	First Name	Middle Name	Last N	ame				
United	d States Ba	nkruptcy Court for the:	Northern	District of IIII	inois State)				
	number			(0	naic)				
(If kno	wn)								
Offi	cial Fo	rm 106E/F					Chec	ck if this is an	amended filing
Scl	nedu	le E/F: Cre	ditors Who	Have U	nsecure	d Claims			12/15
			ole. Use Part 1 for creditor						
106Å/E are list the bo	B) and on Sted in Sche xes on the	Schedule G: Executory edule D: Creditors Who left. Attach the Contin	expired leases that could recontracts and Unexpired by Hold Claims Secured by huation Page to this page by Unsecured Claims	d Leases (Officia y Property. If mo . On the top of a	al Form 106G). Do ore space is neede	not include any credito ed, copy the Part you ne	rs with parti ed, fill it out	ally secured , number the	l claims that e entries in
1.	Do any cre	ditors have priority uns	secured claims against yo	ou?					
	No. Go	to Part 2.	•						
İ	Yes.								
i F I	dentify what cossible, list Part 1. If mo	t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold	claims. If a creditor has ma aim has both priority and nor al order according to the cre ds a particular claim, list the claim, see the instructions fo	npriority amounts, editor's name. If y other creditors in	, list that claim here : ou have more than n Part 3.	and show both priority and	d nonpriority a	amounts. As r	much as
							Total claim	Priority amount	Nonpriority amount

Doc 1 Filed 05/09/126s Entered 05/09/126 09/129:31 Desc Main Debtor 1 Document Page 24 of 74 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 CDA/PONTIAC \$523.00 Last 4 digits of account number Nonpriority Creditor's Name 415 E MAÍN When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent STREATOR Illinois 61364 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ collection for: foundation emergency Is the claim subject to offset? Other. Specify **✓** No Yes 4.2 Cerastes \$340.00 Last 4 digits of account number Nonpriority Creditor's Name 2001 WESTERN AVENUE, STE 400 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 98121 Seattle Washington Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify collection for: debt **✓** No Yes 4.3 CERTIFIED SERVICES INC \$1,605.00 Last 4 digits of account number 0801 Nonpriority Creditor's Name 1733 WAŚHINGTON ST STE 2 When was the debt incurred? 8/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent WAUKEGAN Illinois 60085 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed V Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that

**✓** No

Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

Other. Specify

✓

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

001 Collection; Collecting for ORIGINAL

CREDITOR: MEDICAL PAYMENT

DATA

Debtor 1 Christin ase 16-1566 Doc 1
First Name Middle Name Filed 05/09/126s Entered 05/09/16/09/19:31 Desc Main Document Page 25 of 74

Part 2: Y	our NONPRIORITY	Unsecured	Claims -	Continuation	Page
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	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.4	Check 'N Go	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name 5638 W Fullerton	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.  Contingent	
	Chicago Illinois 60639	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>collection for: payday loan</u>	
	✓ No		
	Yes		
4.5	City of Chicago Parking Nonpriority Creditor's Name	Last 4 digits of account number	\$4,168.00
	121 N. LaŚalle St # 107A	When was the debt incurred? n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	ChicagoIllinois60602CityStateZip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>collection for: parking tickets</u>	
	No		
	Yes		
4.6	COMMONWEALTH FINANCIAL Nonpriority Creditor's Name	Last 4 digits of account number 43N1	\$621.00
	29 Sawyer Rd	When was the debt incurred? n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Waltham Massachusetts 02453	Unliquidated	
	Waltham Massachusetts 02453 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only  Debtor 2 only	Student loans	
		Obligations arising out of a separation agreement or divorce that	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	you did not report as priority claims	
	<b>=</b>	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify <u>collection for: windy city emergency</u>	
	Is the claim subject to offset?		
	☐ Yes		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning with	h 4.5, followed by 4.6, and so forth.	Total claim
4.7		Last 4 digits of account number 95N1	\$1,090.00
	Nonpriority Creditor's Name 29 Sawyer Rd	When was the debt incurred?	
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply.  Contingent	
		Unliquidated	
	Waltham Massachusetts 02453 City State Zip Code	· <b>=</b>	
	Who incurred the debt? Check one.	Disputed  Type of NONDRIGHTY unsequend elements	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	collection for: crandon emergency	
	Is the claim subject to offset?	Other. Specify <u>physicians</u>	
	<u>✓</u> No		
	Yes		
4.8	COMNWLTH FIN Nonpriority Creditor's Name	Last 4 digits of account number 02N1	\$621.00
	960 N MAIN STREET	When was the debt incurred? 2/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	SCRANTON Pennsylvania 18508	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	<u>~</u>	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Collection; Collecting for ORIGINAL	
	<b>✓</b> No	Other. Specify CREDITOR: MEDICAL	
	Yes		
4.9	CUSTOM COLL SRVS INC	Last 4 digits of account number 4126	\$2,450.00
	Nonpriority Creditor's Name 55 EAST 86TH AVE STE D	<u> </u>	
	Number Street	. When was the debt incurred? 3/1/2011	
		As of the date you file, the claim is: Check all that apply.	
	MERRILLVILLE Indiana 46411	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	O01 Collection; Collecting for ORIGINAL	
	No	CREDITOR: MEDICAL PAYMENT	
	☐ Yes	Other. Specify DATA; CHAPTER 13	

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.10	DEPT OF ED/NAVIENT	Local Additional account number 4000	\$20,753.00
	Nonpriority Creditor's Name	- Last 4 digits of account number 1023	φ=0;: σσ.σσ
	PO Box 9635 Number Street	When was the debt incurred? 10/1/2009	
		As of the date you file, the claim is: Check all that apply.	
	Wilkes Barre Pennsylvania 18773	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	<u>✓</u> No		
	<u></u> Yes		
	ENHANCED RECOVERY CO Nonpriority Creditor's Name	Last 4 digits of account number 8836	\$419.00
	8014 Bayberry Road	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Jacksonville Florida 32256	<b>=</b>	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>collection for: comcast</u>	
	<b>☑</b> No		
	Yes		
4.12	FIFTH THIRD BANK	- Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name 5050 KINGSLEY DR	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	CINCINNATI Ohio 45227	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
		you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  No	Other. Specify notice only	
	Yes		

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First Name Middle Name Doc

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.13 Jefferson Capital Systems LLC \$6,855.21 Last 4 digits of account number Nonpriority Creditor's Name PO Box 7999 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Saint Cloud Minnesota Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify collection for: square two financial corp Is the claim subject to offset? **✓** No Yes 4.14 MEDICAL BUSINESS BUREAU \$1,250.00 Last 4 digits of account number Nonpriority Creditor's Name 1550 N NÓRTWEST HWY STE 403 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE 60068 Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? **✓** collection attorney: med1 02 chicago Other. Specify imaging Itd **✓** No Yes 4.15 PLS Financial Services, Inc. \$550.00 Last 4 digits of account number Nonpriority Creditor's Name One South Wacker Drive, 36th Floor When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify collection for: payday loan **✓** No

Yes

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First Name Middle Name

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.16 REGIONAL RECOVERY SERV \$584.00 Last 4 digits of account number Nonpriority Creditor's Name 5250 S HÓMAN AVE When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **HAMMOND** Indiana Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts collection for: medical Is the claim subject to offset? Other. Specify **✓** No ☐ Yes 4.17 St. Bernard Hospital \$3,000.00 Last 4 digits of account number Nonpriority Creditor's Name 326 W 64th St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60621 Chicago Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset?  $\Box$ Other, Specify collection for: medical bill **✓** No Yes 4.18 Trinity Hospital \$1.00 Last 4 digits of account number Nonpriority Creditor's Name 2320 E 93rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60617 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify collection for: medical bill

✓ No Yes

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Part 3: List Others to Be Notified About a Debt That You Already Listed

collection agency agency here. Simi	is trying to collect larly, if you have mo	from you for a debt yore than one creditor	at your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you bts in Parts 1 or 2, do not fill out or submit this page.			
HARRIS & HARRIS LTD Name			On which entry in Part 1 or Part 2 did you list the original creditor?			
111 W JACKSON	BLVD S-400		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Stree	et		Part 2: Creditors with Nonpriority Unsecured Claims			
CHICAGO	Illinois	60604	Last 4 digits of account number			
City	State	Zip Code				

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Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.  Add the amounts for each type of unsecured claim.								
				Total claims				
Total claims from Part 1	6a.	Domestic support obligations.	6a.	\$0.00				
monit dit i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00				
	6c. Claims for death or personal injury while you were intoxic		6c.	\$0.00				
	6d.	. Other. Add all other priority unsecured claims. Write that amount here.		\$0.00				
	6e.	Total. Add lines 6a through 6d.	6e.	\$0.00				
				Total claims				
Total claims from Part 2	6f.	Student loans	6f.	\$20,753.00				
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00				
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00				
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$25,278.21				
	6j.	Total. Add lines 6f through 6i.	6j.	\$46,031.21				

	Case 16-1566	6 Doc 1 Filed 0	5/09/16	Entered 05/0	19/16 09:19:31	Desc Main	
Fill in this inform	ation to identify your case						
Debtor 1	Christina	Middle Nove	Manzan				
Debtor 2	First Name	Middle Name	Last Nar	me			
(Spouse, if filing)	First Name	Middle Name	Last Nar	me			
United States Ba	ankruptcy Court for the:	Northern	District of Illing				
Case number (If known)							
Official F	Form 106G				1		Check if this is ar amended filing
Schedul	e G: Execut	ory Contracts	and Une	expired Le	eases		12/1
	I, copy the additional p	ole. If two married people are age, fill it out, number the er					
1. Do you ha	ave any executory	contracts or unexpired	l leases?				
✓ No. Che	ck this box and file this for	m with the court with your othe	er schedules. You	ı have nothing else t	o report on this form.		
Yes. Fill i	in all of the information be	elow even if the contracts or lea	ases are listed or	n <i>Schedule A/B: Pro</i>	perty (Official Form 106A	/B).	
		npany with whom you have t nstructions for this form in the ir					ıple, rent,
Person	or company with whor	n you have the contract or le	ease		State what the contract	t or lease is for	

		Case 16-1566	6 Doc 1 Filad (	05/00/16 Entorod	05/09/16 09:19:31	Desc Main
Fill	in this inform	nation to identify your cas			0.30.9/10 09.19.31	Desc Main
De	btor 1	Christina		Manzanales		
D-	ht 0	First Name	Middle Name	Last Name		
	btor 2 oouse, if filing	First Name	Middle Name	Last Name	_	
Un	ited States B	ankruptcy Court for the:	Northern	District of Illinois		
	se number (nown)			(State)		
						Check if this is an amended filing
Of	fficial F	Form 106H				anended liling
		e H: Your Co	odebtors			12/1:
in th	ne boxes on ry question.	the left. Attach the Add	ditional Page to this page. C		Pages, write your name and c	ge, fill it out, and number the entries case number (if known). Answer
2.	Louisiana, No. G	Nevada, New Mexico, Puo o to line 3.	lived in a community proper erto Rico, Texas, Washington, pouse, or legal equivalent live	and Wisconsin.)	nunity property states and territor	ries include Arizona, California, Idaho,
		Yes. In which community s	state or territory did you live? _	Fill in the	name and current address of the	at person.
		Name of your spouse, f	ormer spouse, or legal equival	ent	_	
		Number Street			_	
		City	State	Zip Code	_	
3.	as a codeb	tor only if that person	is a guarantor or cosigner. I	Make sure you have listed th		t the person shown in line 2 again fficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

An armended filling   First Name   Middle Name   Last Name   An armended filling   Anderson   And	Fill in th	nis information to identify	y your case:	10010	أخصنا	9/16 09	:19:31	Desc N	∕lain	
First Name			Docui		_	7-7				
Described Figure ( filing) First Name	Debtor 1					_				
Described States Bankruptcy Court for the: Northern		First Name	Middle Name	Last Nam	е		Check if this	is:		
United States Bankruptcy Court for the: Northern District of Illinois (State)    Case number						_	_			
Compation   Comp	(Spouse,	if filing) First Name	Middle Name	Last Nam	е		An ame	idea illing		
Difficial Form 106  Schedule I: Your Income  as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, cloude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nore than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  Debtor 2  Estimate monthly income as of the date you file this form. If you have northing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 1  For Debtor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach deductions, if not paid morthly calculates what he morthly wage would be.	United Sta	ates Bankruptcy Court for the:	Northern			_				
Schedule I: Your Income  It as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally esponsible for supplying correct information. If you are separated and your spouse is not filing with you, do not include an obout your spouse. If you are separated and your spouse is not filing with you, do not include any correct programment of the programment		nber		(2.33)		-	MM / DI	D/YYYY	_	
te as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally asponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, notude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation rey include student or homemaker, if it applies.  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  Part 2: List monthly gross wages, salary, and commissions (before all payroll 2. \$2.00.000 to the space. Include your non-filing spouse in the space in the filing plants of the space is living with you, and your spouse on the lines below. If you need more space, attach a separate sheet to this form.	Offici	al Form 106I								
esponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question.  Part 1: Describe Employment  1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation Employer's name Addus Home Healthcare  Employer's address  Employer's address  Employer's saddress  Chicago Illinois 60643  City State Zip Code  How long employed there?  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2  For Debtor 3  For Debtor 2  For Debtor 3  For Debtor 3  For Debtor 3  For Debtor 4  For Debtor 5  For Debtor 4  For Debtor 5  For Debtor 4  For Debtor 4  For Debtor 4  For Debtor 5  For Debtor 4  For Debtor 5  For Debtor 4	Sche	dule I: Your Inc	ome							12/15
If you have more than one job, attach a separate page with information about additional employers.  Include part time, seasonal, or self-employed work.  Occupation Employer's name  Employer's address  Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  How long employed there?  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse	nformat ages, v	tion about your spouse vrite your name and ca	e. If more space is neede se number (if known). A	ed, attach a	separate sl					
If you have more than one job, attach a separate page with information about additional employers.   Cocupation   Mot Employed   Mot Employers   Mot Em	1.	Fill in your employment		Debtor 1			Debtor 2			
If you have more than one job, attach a separate page with information about additional employers.  Employer's name Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Chicago Illinois 60643 City State Zip Code City State Zip Code  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  Estimate monthly income as of the date you file this form. If you have nothing to report for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.		information.	Forming we are the tree							
Not Employed   Not Employer   Not Employer   Not Employer   Not Employer   Not Employers		If you have more than one	Employment status	✓ Employed			Employ	/ed		
information about additional employers.  Employer's name    Addus Home Healthcare   Addus Home Healthc		•		Not Emplo	yed		☐ Not En	nployed		
Employer's name Addus Home Healthcare Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  How long employed there?  Employer's address  Chicago Illinois 60643 City State Zip Code  G years  For Debtor 1  For Debtor 2 or non-filing spouse  For Debtor 2 or non-filing spouse  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.					wl		_			
Include part time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  How long employed there?  Employer's address  Chicago Illinois 60643  City State Zip Code  How long employed there?  Chicago Illinois 60643  City State Zip Code  Gears  For Debtor 1  For Debtor 2 or non-filling spouse  For Debtor 2 or non-filling spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.			Occupation	nealthcare wol	rker		-			
or self-employed work.  Occupation may include student or homemaker, if it applies.  Chicago Illinois 60643 City State Zip Code  How long employed there?  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.			Employer's name	Addus Home I	Healthcare					
Self-employed work.  Occupation may include student or homemaker, if it applies.  How long employed there?  Chicago Illinois 60643 City State Zip Code  How long employed there?  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.		•	Employer's address	9259 S. Weste	em Ave					
Student or homemaker, if it applies.  Chicago Illinois 60643 City State Zip Code  How long employed there?  6 years  For Debtor 1 a separate sheet to this form. If you say or your non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.  Chicago Illinois 60643 City State Zip Code  City State Zip Code  City State Zip Code  City State Zip Code  For Debtor 1 For Debtor 2 or non-filing spouse  \$2,103.31				Number Street			Number Stre	eet		
Chicago Illinois 60643 City State Zip Code  How long employed there?  Chicago State Zip Code  Other State Zip										
How long employed there?    City   State   Zip Code   City   State   Zip Code				Chicago	Illinoia	60642				
How long employed there?  6 years  For Debtor 1  For Debtor 2 or non-filing spouse  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.							City		State	Zip Code
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.			How long employed there?							
For Debtor 1  List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.  For Debtor 1  2. \$2,103.31	Estimate are separate of the s	e monthly income as of the darated.  your non-filing spouse have mo	date you file this form. If you ha							-
deductions.) If not paid monthly, calculate what the monthly wage would be.	a separa	ne sneet to this form.			For	Debtor 1				
						\$2,103.31		_	_	
o. Estimate and hist monthly overtime pay. 5. + \$0.00	Estimate and list monthly overtime pay.				3.	+ \$0.00				

4. Calculate gross income. Add line 2 + line 3.

\$2,103.31

Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main ChristinaCase 16-15666 Doc 1 Middle Name Documentame Page 35 of 74 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$2,103.31 5. List all payroll deductions: \$387.27 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$387.27 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$1,716.04 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income \$350.00 8f. 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$350.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$2,066.04 \$2,066.04 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$2,066.04 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

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	Case 16-1566	6 Doc 1 Filed 05	5/09/16 Entered 05/	09/16 09:19:31	Desc Main	
Fill in this inforn	nation to identify your cas		J			
Debtor 1	Christina		Manzanales			
	First Name	Middle Name	Last Name			
Debtor 2	\ <del></del>			Check if this is:		
(Spouse, if filing	First Name	Middle Name	Last Name	An amended fili	ng	
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)		howing post-petition of the following date:	chapter 13
Case number (If known)				- MA / P.D. / NO.01	<del></del>	
,				MM / DD / YYY	Y	
Official F	Form 106J					
Schedul	e J: Your Ex	penses				12/1
nformation. If r f known). Answ Part 1: Desc 1. Is this a join	nore space is needed, wer every question. cribe Your Househot t case? to line 2	attach another sheet to this fo	filing together, both are equally orm. On the top of any additional			r
Yes. <b>Do</b>	es Debtor 2 live in a se	eparate household?				
	No					
	Yes. Debtor 2 must file	e Official Forms 106J-2, <i>Expens</i>	es for Separate Household of Debi	tor 2.		
2. Do you have	e dependents?	lo				
Do not list De Debtor 2.		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age 4 years	Does depende with you?	nt live
					✓ Yes.	
			Child	1 year	No. ✓ Yes.	
3. Do your exp	enses include					
•	f people other	10				
than yourself and dependents	your <u> </u>	'es				
Part 2: Estir	nate Your Ongoing	Monthly Expenses				
Estimate your	expenses as of your bar of a date after the bankr	ankruptcy filing date unless y	ou are using this form as a supp elemental Schedule J, check the	· -	•	
	•	eash government assistance it on Schedule I: Your Income	•		You	r expenses
	or home ownership exp the ground or lot. 4.	penses for your residence. Inc	ude first mortgage payments and		4.	\$375.00
If not inclu	uded in line 4:					
4a. Real es	tate taxes				4a _	\$0.00
4b. Propert	y, homeowner's, or rente	r's insurance			4b	\$0.00
4c. Home n	naintenance, repair, and u	inkeen expenses			40	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/126s Entered 05/09/126/09/149:31 Desc Main

Document Page 38 of 74 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$230.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$250.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$374.00 7. 8. Childcare and children's education costs \$350.00 8. 9. Clothing, laundry, and dry cleaning \$60.00 9. 10. Personal care products and services \$25.00 10. 11. Medical and dental expenses \$10.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$150.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$50.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \_ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d

\$0.00

20e

20e. Homeowner's association or condominium dues

First Name Middle Name Document Page 39 of 74  21. Other. Specify:	\$0.00
22. Calculate your monthly expenses.	\$1,874.00
22a. Add lines 4 through 21.	\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$1,874.00
22c. Add line 22a and 22b. The result is your monthly expenses.	
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	\$2,066.04
23b. Copy your monthly expenses from line 22 above.	\$1,874.00
23c. Subtract your monthly expenses from your monthly income.	\$192.04
The result is your monthly net income.	
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your	
mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
✓ No	
☐ Yes	
Explain here:	

page 3

Fill in this inform	Case 16-15666 mation to identify your case:			n n5/n9/16 n9 19 31	
	Halloff to idefility your case.		5/09/16 Entere	3/10 03.13.01	Desc Main
Debtor 1	Christina		Manzanales		
İ	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States F	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(State)		
Official	Form 106Dec				Check if this is a amended filing
Declara	tion About an	Individual Del	btor's Sched	ules	12/1
property by fra 1519, and 3571.  Part 1: Sigr		ınkruptcy case can result ir	n fines up to \$250,000, or	imprisonment for up to 20 year	ars, or both. 18 U.S.C. §§ 152, 1341,
Did you p		ne who is NOT an attorney	to help you fill out bankr	uptcy forms?	
Did you p		ne who is NOT an attorney	to help you fill out bankr	ruptcy forms?	
✓ No		ne who is NOT an attorney		Petition Preparer's Notice, Decla	aration, and

Fill	in this inform	Case 16-15660 nation to identify your case	6 Doc 1	Filed 05/09/16	Entered 05	09/16 09:19:31	. Desc Main
	otor 1	Christina		Manzai			
Del	otor 2	First Name	Middle N	Name Last Na	ame		
(Sp	ouse, if filing	First Name	Middle N	Name Last Na	ame		
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illin	nois tate)		
	se number nown)			· ·			
Of	ficial F	Form 107				_	Check if this is a amended filing
			al Affairs	for Individua	als Filing	for Bankrup	otcv 12/1
spac	e is needed	d, attach a separate she	et to this form. On		al pages, write you		olying correct information. If more ber (if known). Answer every question
1.	What is	your current marital sta	itus?				
	☐ Mar ✓ Not	ried married					
2.	During t	he last 3 years, have you	ı lived anywhere o	other than where you live	now?		
	✓ No Yes.	List all of the places you li	ved in the last 3 yea	ars. Do not include where y	ou live now.		
	Deb	tor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as I	Debtor 1	Same as Debtor 1
	Num	nber Street		From	Number Stree	et .	From
				_ To			To
	City	State	Zip Code	_	City	State Zip	Code
					Same as I	Debtor 1	Same as Debtor 1
	Num	nber Street		From	Number Stree	et	From
				_ To			To
	City	State	Zip Code	_	City	State Zip	Code
3.	territories in	nclude Arizona, California,	Idaho, Louisiana, N	use or legal equivalent in Nevada, New Mexico, Pue otors (Official Form 106H).			? (Community property states and)

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:49:31 Desc Main

	First Name Middle Na	Document	Page 42 of 74								
Part	2: Explain the Sources of Your Inc	ome									
4.	<ul> <li>Did you have any income from employment or from operating a business during this year or the two previous calendar years?</li> <li>Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>										
		Debtor 1		Debtor 2							
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)						
	From January 1 of current year until the date you filed for bankruptcy:	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$5085.34	Wages, commissions, bonuses, tips Operating a business							
	For last calendar year: (January 1 to December 31,	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$25000.00	Wages, commissions, bonuses, tips Operating a business							
	For the calendar year before that: (January 1 to December 31,	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$25000.00	Wages, commissions, bonuses, tips Operating a business							
	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; internand you have income that you received together,  List each source and the gross income from each No  Yes. Fill in the details.	ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child so from lawsuits; royalties; and	gambling and lottery winnings.							
		Debtor 1		Debtor 2							
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)						
	From January 1 of current year until the date you filed for bankruptcy:	LINK	\$1,400.00								
LINK \$4,200.00  For last calendar year:  (January 1 to December 31, 2015)											

YYYY

LINK

For the calendar year before that:

(January 1 to December 31, 2014

\$4,200.00

Debtor 1 Christin Case 16-15666 Doc 1 Filed 05/09/126s Entered 05/09/16/09/19:31 Desc Main

rst Name Documetration Page 43 of 74

List Certain Payments You Made Before You Filed for Bankruptcy

Part 3:

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other

Doc 1 Filed 05/09/16s Entered 05/09/16/09/19:31 Desc Main Debtor 1 Document Page 44 of 74 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 ChristinGase 16-15666 Doc 1 Filed 05/09/166s Entered 05/09/16 (09/19:31 Desc Main First Name Middle Name Documes Name Page 45 of 74

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Within 1 year before you filed for ba						
List all such matters, including personal disputes.						
✓ No  Yes. Fill in the details.						
_	Nature	of the case	Court or a	igency		Status of the case
Case title						Pending
			Court Nam	ie		On appeal
Case number			Number S	treet		Concluded
			City	State	Zip Code	_
Case title						Pending
			Court Nam	ne		On appeal
Case number			Number S	treet		- Concluded
			City	State	Zip Code	_
		Describe the pro	operty		Date	Value of the property
Creditor's Name		-				
		Explain what hap	ppened			
Number Street						
		□ Burnet on				
			repossessed.			
		Property was Property was Property was	foreclosed.			
City State	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized,	or levied.		
	Zip Code	Property was Property was	foreclosed. garnished. attached, seized,	or levied.	Date	Value of the property
City State	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized,	or levied.	Date	
	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized, operty	or levied.	Date	
City State	Zip Code	Property was Property was Property was Property was Describe the pro	foreclosed. garnished. attached, seized, operty	or levied.	Date	
City State  Creditor's Name	Zip Code	Property was Property was Property was Property was Describe the pro  Explain what hap	foreclosed. garnished. attached, seized, pperty  ppened repossessed.	or levied.	Date	
City State  Creditor's Name	Zip Code	Property was Property was Property was Describe the pro Explain what hap	foreclosed. garnished. attached, seized, operty  ppened repossessed. foreclosed.	or levied.	Date	

Debt	or 1		<u>d 05/09/126s Entered</u> 05/09/116/09:119: ocument Page 46 of 74	31 Desc	<u>Main</u>
11.		ounts or refuse to make a payment because you owe	creditor, including a bank or financial institution, set of	ff any amounts fr	om your
	님	No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			-
		Number Street		'	
			Last 4 digits of account number: XXXX-		
		City State Zip Code			
		in 1 year before you filed for bankruptcy, was any o iver, a custodian, or another official?	f your property in the possession of an assignee for th	e benefit of credi	tors, a court-appointed
	<b>✓</b>	No Yes			
Part	5:	ist Certain Gifts and Contributions			
13.	Wit	hin 2 years before you filed for bankruptcy, did you	give any gifts with a total value of more than \$600 per	person?	
	<b>✓</b>	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code  Person's relationship to you			
		Person to Whom You Gave the Gift			·
		Number Street			
		City State Zip Code			
		Person's relationship to you			

		FIRST Name	IVI	liddle Name Do	ocumente Page 47 of 74		
14.	With	nin 2 years before yo	ou filed for ba		give any gifts or contributions with a total value of mor	e than \$600 to an	y charity?
		No Yes. Fill in the details	for each gift o	or contribution.			
	_	Gifts with a total va			Describe the gifts	Dates you gave the gifts	Value
		Charity's Name					
		Number Street					
Dont	<u>.</u>	City	State	Zip Code			
Part 15.		_ist Certain Loss		kruptcy or since v	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster. or
	gam	bling?		. , ,		, ,	,
		No Yes. Fill in the details.					
		Describe the proper how the loss occurrence		nd	Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
					insurance claims on line 33 of Schedule A/B: Property.		
Part		ist Certain Payr					
16.	seek	ing bankruptcy or p	reparing a ba	nkruptcy petition	r anyone else acting on your behalf pay or transfer any   ? t counseling agencies for services required in your bankrupto		ie you consulted about
	_	No		, ,		•	
	<b>✓</b>	Yes. Fill in the details.	•				
					Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm			Attorney's Fee - 1200.00	5/5/2016	\$1200.00
		Person Who Was Pai	id				· · · · · · · · · · · · · · · · · · ·
		20 South Clark Stree	t 28th Floor				
		Number Street					
		Chicago	Illinois	60606			
		City	State	Zip Code			
		Email or website add					
		Person Who Made th	e Payment, if N	Not You			
		Person Who Was Pai	id				
		Number Street					
		City	State	Zip Code			
		Email or website add	Iress				
		Person Who Made th	e Payment, if N	Not You			

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	No Yes. Fill in the details.						
			Description and value of any property	erty transferred	Date payment or transfer was made	Amou	nt of paymer
	Person Who Was Paid		-				
	Number Street		-				
	City State	Zip Code	-				
Inc	linary course of your business or fir ude both outright transfers and transfe asfers that you have already listed on thi No Yes. Fill in the details.	rs made as secur	ity (such as the granting of a security inte	erest or mortgage on	your property). Do	not incl	ude gifts and
			Description and value of any property transferred		property or paym ebts paid in exch		Date trans was made
	Person Who Received Transfer		-				
	Number Street		_				
	City State Person's relationship to you	Zip Code	-				
	Person Who Received Transfer		-				-
	Number Street		<del>-</del>				
	City State Person's relationship to you	Zip Code	_				
	ese are often called asset-protection de		u transfer any property to a self-settle	d trust or similar de	evice of which yo	u are a l	beneficiary?
	Yes. Fill in the details.		Description and value of the prop	erty transferred			Date trans
(Tr							was made

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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

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	or tra	in 1 year before you filed for bankruptcy, were ansferred? de checking, savings, money market, or other finance eratives, associations, and other financial institution	cial accounts; certificates of depos				
		No Yes. Fill in the details.					
			Last 4 digits of account number	Type of instrum	account or ent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	— XXXX-	Che	cking ings		
		Number Street	<u> </u>		ey market kerage er		
		City State Zip Code					
		Person Who Was Paid	XXXX-	Che	cking ings		
		Number Street	_		ey market kerage		
		City State Zip Code	_	Othe	er		
	valua	ou now have, or did you have within 1 year beforables?  No  Yes. Fill in the details.	ore you filed for bankruptcy, an	y safe deposit	box or other deposito  Describe the contents		Do you still have it?
		Name of Financial Institution	Name				☐ No
		Number Street	Number Street				Yes
		City State Zip Code	City State	Zip Code			
22.	Have	City State Zip Code  you stored property in a storage unit or place	other than your home within 1	year before yo	ou filed for bankruptcy	?	
		No Yes. Fill in the details.					
	_		Who else had access to it?		Describe the contents	S	Do you still have it?
		Name of Storage Facility	Name				☐ No ☐ Yes
		Number Street	Number Street				
		City State Zip Code	City State	Zip Code			

Describe the contents any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.	Deb	tor 1	First Name Middle Name	Docume	<sup>e</sup> nt <sup>™</sup> Paç	ntered_0 <b>5</b> /0 ge 50 of 74	9/16/09:19:31 Desc Mair	1
No   Yes, Fill in the details.   Where is the property?   Describe the contents   Value	Part	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
Where is the property?    Describe the contents   Value	23.	_	No	e else owns? lı	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
Number Street		Ц	res. Fill in the details.	Where is th	e property?		Describe the contents	Value
Number Street			Owner's Name	Number Stre	eet		-	
City   State   Zip Code							_	
Part 10:   Give Details About Environmental Information			Number Street					
Part 10: Give Details About Environmental Information  For the purpose of Part 10, the following definitions apply:  • Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  • Site means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  • Hazardous material pollution, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No				City	State	Zip Code	-	
For the purpose of Part 10, the following definitions apply:  ### Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  #### Sire means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  #### Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, polutiant, contaminant, or similar term.  #### Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  ###################################			City State Zip Code	_				
Emvironmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.      Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.      Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?      No     Yes. Fill in the details.      Governmental unit     Number Street     Number Street	Part	10:	Give Details About Environmental In	formation				
hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  • Site means any location, facility, or properly as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  • Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No	For	the p	urpose of Part 10, the following definitions apply:					
or used to own, operate, or utilize it, including disposal sites.    Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   Report all notices, releases, and proceedings that you know about, regardless of when they occurred.   Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   Value		ha	azardous or toxic substances, wastes, or material in	nto the air, land,	soil, surface wa	ater, groundwater		
toxic substance, hazardous material, pollutant, contaminant, or similar term.  Report all notices, releases, and proceedings that you know about, regardless of when they occurred.  24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No				•	vironmental law,	whether you now	own, operate, or utilize it	
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?    No			·			raste, hazardous s	substance,	
No   Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of notice	Rep	oort al	I notices, releases, and proceedings that you know	about, regardle	ess of when they	occurred.		
Yes. Fill in the details.    Governmental unit	24.	Has	any governmental unit notified you that you r	may be liable o	or potentially lia	able under or in	violation of an environmental law?	
Name of site   Governmental unit   Environmental law, if you know it   Date of notice		<u> </u>						
Name of site    Number Street		Ц	Yes. Fill in the details.	Governmen	ntal unit		Environmental law. if you know it	Date of notice
Number Street    Number Street     Number Street				_			_	
City State Zip Code  City State Zip Code  25. Have you notified any governmental unit of any release of hazardous material?  ✓ No				_			_	
25. Have you notified any governmental unit of any release of hazardous material?    No			Number Street	Number Stre	eet			
25. Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Governmental unit  Name of site  Number Street  Number Street  City State Zip Code  Date of notice				City	State	Zip Code	-	
No Yes. Fill in the details.  Governmental unit  Name of site Number Street  Number Street  City State Zip Code  Environmental law, if you know it  Date of notice  Date of notice			City State Zip Code	_				
Yes. Fill in the details.  Governmental unit  Name of site  Number Street  City State Zip Code  Environmental law, if you know it  Date of notice  Date of notice	25.	Hav	e you notified any governmental unit of any re	elease of hazar	dous material	?		
Name of site  Number Street  City State Zip Code    Date of notice   Date of notice								
Number Street    Number Street   City   State   Zip Code		Ц	res. I ill ill the details.	Governmen	ntal unit		Environmental law, if you know it	Date of notice
City State Zip Code			Name of site	Governmenta	al unit		-	
			Number Street	Number Stre	eet		-	
City State Zip Code				City	State	Zip Code	-	
			City State Zip Code	_				

Debtor	1	Christin ase 16-15666 First Name	Doc 1 F		<u>Entered</u>	<b>√16</b> ∕09 ⊭19: <u>31 Desc Mai</u> i	<u> 1</u>
26. H	av	e you been a party in any judic	ial or administrati	ve proceeding under an	y environmental law	? Include settlements and orders.	
<u> </u>	1	No					
L	_	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
		Coop title		G ,			case
		Case title		Court Name			Pending
							On appeal
		Case number		Number Street			Concluded
				City State	Zip Code		
Part 11	:	<b>Give Details About Your</b>	Business or C	connections to Any	Business		
27. W	/ith	nin 4 years before you filed for	bankruptcy, did y	ou own a business or ha	eve any of the follow	ing connections to any business?	
		A sole proprietor or self-emp	oloyed in a trade, pr	ofession, or other activity,	either full-time or part	-time	
		A member of a limited liabilit	y company (LLC) o	or limited liability partnersh	ip (LLP)		
		A partner in a partnership  An officer, director, or mana	ging executive of a	corporation			
		An owner of at least 5% of the					
<u>_</u>	1	No. None of the above applies. G	o to Part 12.				
	]	Yes. Check all that apply above a	nd fill in the details b			- 1 11 25 2	
				Describe the nature	re of the business	Employer Identification nun include Social Security num	
		Business Name				EIN:	
		Number Street		Name of accounta	nt or bookkeeper	Dates business existed	
		City State	Zip Code			FromTo	
				Describe the natur	re of the business	Employer Identification nun include Social Security num	
		Duainean Nama				EIN:	
		Business Name					
		Number Street		Name of accounta	nt or bookkeeper	Dates business existed	
		City State	Zip Code			From To	<u></u>
				Describe the natur	re of the business	Employer Identification nun	nber Do not
						include Social Security num	
		Business Name				EIN:	
		Number Street				Dates business existed	
				Name of accounta	nt or bookkeeper		
		City State	Zip Code			FromTo	

Debtor		ed 05/09/16s Entered 05/09/16/09/19: <u>31 Desc Main</u> Pocument Page 52 of 74
		give a financial statement to anyone about your business? Include all financial institutions,
<u>√</u>	No Yes. Fill in the details below.	
	_	Date issued
	Name	MM/DD/YYYY
	Number Street	
	City State Zip Code	_
Part 12	Sign Below	
and	d correct. I understand that making a false statement,	Affairs and any attachments, and I declare under penalty of perjury that the answers are true s, concealing property, or obtaining money or property by fraud in connection with a aprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debtor 1	Signature of Debtor 2
	Date 5/9/2016	Date
Dic	l you attach additional pages to Your Statement of Fin No Yes	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Dic	I you pay or agree to pay someone who is not an attor	rney to help you fill out bankruptcy forms?
<u> </u>	No	Attach the Bankruptcy Petition Preparer's Notice,
ш	Yes. Name of person	Declaration, and Signature (Official Form 119).

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#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

In re	Christina Manzanales	Case No.	
-	Debtor		(If known)
		Chapter	Chapter 13
	DISCLOSURE OF COMPENSATI	ON OF ATTORNEY FOR	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of rendered or to be rendered on behalf of the debtor(s) in con-	the petition in bankruptcy, or agreed to	be paid to me, for services
	For legal services, I have agreed to accept		\$4,000.00
	Prior to the filing of this statement I have received		\$1,200.00
	Balance Due		\$2,800.00
2.	The source of the compensation paid to me was:		
	✓ Debtor Other (spec	rify)	
3.	The source of the compensation paid to me is:		
	Debtor Other (spec	eify)	
4.	I have not agreed to share the above-disclosed compen members and associates of my law firm.	sation with any other person unless the	ey are
	I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the athe people sharing in the compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to rend a. Analysis of the debtor's financial situation, and rende bankruptcy;	•	
	b. Preparation and filing of any petition, schedules, stat	tements of affairs and plan which may b	pe required;
	c. Representation of the debtor at the meeting of credite	ors and confirmation hearing, and any a	djourned hearings thereof;

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

	CERTIFICATION
	CERTIFICATION
I certify that the foregoing is a complet the debtor(s) in this bankruptcy proceeding	e statement of any agreement or arrangement for payment to me for representation of s.
5/9/2016	/s/ Michael Spangler 6310219
Date	Signature of Attorney

Semrad Law Firm

Name of law firm

Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main Document Page 54 of 74 Government With the debtor(s), the above-disclosed fee does not include the following services:

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### UNITED STATES BANKRUPTCY COURT

#### Northern District of Illinois

In re	Christina Manzanales		* Case No.	4
	Debtor		<del></del>	(if known)
			Chapter	Chapter 13
	DISCLOSURE OF C	OMPENSATION O	F ATTORNEY FOR	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one yearendered or to be rendered on behalf of	I. Bankr. P. 2016(b), I certify the	nat I am the attorney for the a	bovenamed debtor(s) and that
	For legal services, I have agreed to acc			\$4,000.00
	Prior to the filing of this statement I have	/e received		\$1,200.00
	Balance Due			\$2,800.00
2.	The source of the compensation paid to	me was:		
	<b>✓</b> Debtor	Other (specify)		
3.	The source of the compensation paid to	me is:	·	
	<b>✓</b> Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law	e-disclosed compensation with firm.	any other person unless they	y are
	I have agreed to share the above-dismembers or associates of my law fithe people sharing in the compensat	rm. A copy of the agreement	ther person or persons who ar together with a list of the nan	e not nes of
5.	In return for the above-disclosed fee, I h a. Analysis of the debtor's financial s bankruptcy;	ave agreed to render legal ser situation, and rendering advice	rvice for all aspects of the bar to the debtor in determining v	nkruptcy case, including: whether to file a petition in
	b. Preparation and filing of any petit	ion, schedules, statements of a	affairs and plan which may be	required;
	c. Representation of the debtor at th	e meeting of creditors and con	ifirmation hearing, and any ad	Journed hearings thereof;
	d. Representation of the debtor in ac			



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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

	CERTIFICATION
I certify that the foregoing is a complet the debtor(s) in this bankruptcy proceeding	e statement of any agreement or arrangement for payment to me for representation of is.
5/5/2016	/s/ Michael Spangler 6310219
Date	Signature of Attorney
	Semrad Law Firm
	Name of law firm

W

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- Before signing this agreement, the attorney has received, \$ 1200.00 toward the flat fee, leaving a balance due of \$ 2800.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 5-5-16.	
Signed: ( . Manyanol	
	1
	Muhespunger
Debtor(s)	Attorney for the Debtor(s)
Do not sign this agreement if the amounts a	ire blank.

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

In re:	Manzanales, Christina	Case No		
	Debtor(s)	Chapter.	Chapter13	
	VERIFICATIO	N OF CREDITOR MAT	·	
The above named Debtors hereby verify that the attack				wledge.
Date:	5/9/2016	/s/ Manzanales, Ch	ristina	
		Manzanales Christ	ina	

Signature of Debtor

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DEPT OF ED/NAVIENT PO Box 9635 Wilkes Barre , PA 18773 USA

CUSTOM COLL SRVS INC 55 EAST 86TH AVE STE D MERRILLVILLE , IN 46411 USA

CERTIFIED SERVICES INC 1733 WASHINGTON ST STE 2 WAUKEGAN , IL 60085 USA

COMNWLTH FIN 960 N MAIN STREET SCRANTON , PA 18508 USA

CDA/PONTIAC 415 E MAIN STREATOR , IL 61364 USA

Check 'N Go 5638 W Fullerton Chicago , IL 60639 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 USA

COMMONWEALTH FINANCIAL 245 MAIN ST DICKSON CITY , PA 18519 USA

COMMONWEALTH FINANCIAL 245 MAIN ST DICKSON CITY , PA 18519 USA

ENHANCED RECOVERY CO 8014 Bayberry Road Jacksonville , FL 32256 USA

FIFTH THIRD BANK 5050 KINGSLEY DR CINCINNATI, OH 45227 USA Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main MEDICAL BUSINESS BUREAU 1550 N NORTWEST HWY STE 403 PARK RIDGE , IL 60068 Document Page 69 of 74

PLS Financial Services, Inc. 920 South Western Ave Chicago , IL 60643 USA

REGIONAL RECOVERY SERV 5250 S HOMAN AVE HAMMOND , IN 46320 LISA

St. Bernard Hospital 326 W 64th St Chicago , IL 60621 USA

Trinity Hospital 2320 E 93rd Chicago , IL 60617 USA

Jefferson Capital Systems LLC PO Box 7999 Saint Cloud , MN 56302 USA

Cerastes 2001 WESTERN AVENUE, STE 400 WEINSTEIN, PINSON AND RILEY, PS Seattle, WA 98121 LISA

Debtor 1 Christine ase 16-	-15666 Doc 1 Filed 05	/09/16 Entered 05/09/ Manzanales National Page 70 of Case no	16 09:19:31 Desc Main
Pan 6 Answer These Q	uestions for Reporting Purpos	_	
16. What kind of debts do you have?	as "incurred by an individual form of the second se	dual primarily for a personal, for a personal perso	debts are debts that you incurred to he operation of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No.  Yes.		property is excluded and administrative expenses are ?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 m	on
20. How much do you estimate your liabilities to be? Part 74. Sign Below	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 mill \$100,000,001-\$500 million	on
	and correct.  If I have chosen to file under Chor 13 of title 11, United States Coproceed under Chapter 7.  If no attorney represents me and fill out this document, I have obtood I request relief in accordance with I understand making a false state connection with a bankruptcy case or both. 18 U.S.C. §§ 152, 1341,  Is/ Christina Manzanales  Signature of Debtor 1  Executed on 5/5/2016	napter 7, I am aware that I may code. I understand the relief availed I did not pay or agree to pay tained and read the notice requite the chapter of title 11, Unite tement, concealing property, on use can result in fines up to \$2, 1519, and 3571.	rerjury that the information provided is true proceed, if eligible, under Chapter 7, 11,12, allable under each chapter, and I choose to someone who is not an attorney to help medired by 11 U.S.C. § 342(b). d States Code, specified in this petition. To obtaining money or property by fraud in 50,000, or imprisonment for up to 20 years, anature of Debtor 2 ecuted on
AN ANN SEAN TO BE THE TENENT OF THE RESIDENCE WAS THE THE THE SEAT OF THE THE SEASON AND THE SEASON AS A SEATHER.	MM / DD /	YYYY	MM / DD / YYYY

Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main Fill in this information to identify your case: Debtor 1 Christina Manzanales First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) (If known) Check if this is an Official Form 106Dec amended filing Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Garrie Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ✓ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. /s/ Christina Manzanales Signature of Debtor 1 Signature of Debtor 2 Date 5/5/2016

MM/DD/YYYY

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MM/DD/YYYY

Debtor 1	Christin Case First Name	16-15666	Doc 1	Filed 05/09/16 Documentaria	Entered Page 72	l 05/09/16 09:19:31 of 74	Desc Main	
28. Wi	thin 2 years befo editors, or other p	re you filed for l	oankruptcy, die				nclude all financial institutions,	
	No Yes. Fill in the de	etails below.						
				Date issued				
	Name		·	MM/DD/YYYY				
	Number Stre	et		**************************************				
	City	State	Zip Code	***************************************			,	
Part 12:	Sign Below							
ana	correct. Funders cruptcy case can	result in fines up s/ Christina Manz	o to \$250,000, c	nent, concealing prope	rh/ or ohtaini	il declare under penalty of per ng money or property by frauc r both. 18 U.S.C. §§ 152, 1341, 1	4 to a company and to a contain a	
	Sign	ature of Debtor 1				Signature of Debtor 2	***************************************	
	Date	5/5/2016				Date		
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes								
Did y	ou pay or agree	pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?						
Economic Economic	No							
LJ)	es. Name of person	חכ	~			Attach the Bankruptcy Petition Declaration, and Signature (Off		

CW

## Case 16-15666 Doc 1 Filed 05/09/16 Entered 05/09/16 09:19:31 Desc Main **UNITEDOCSTRATIES BARRAGEUP3 co 7 COURT**

Northern District of Illinois

In re:	Manzanales, Christina									
	Debtor(s)	Case No.								
		Chapter. Chapter13	·							
	VERIFICATION OF CREDITOR MATRIX									
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowled									
Date:	5/5/2016	/s/ Manzanales, Christina	0							
		Manzanales, Christina Signature of Debtor	and the Canada de la constitución de la constitució							

De	btor 1	Christifica Asse 16-15666 DOC 1 Filed 05/09/16 U9:19:31 Desc Mair First Name Document Larne Page 74 of Chapter number (if known)							
16	Cal	culate the median family income that applies to you. Follow these steps:							
		. Fill in the state in which you live. Illinois							
	16b	. Fill in the number of people in your household.							
		Fill in the median family income for your state and size of household  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.							
17.	Hov	v do the lines compare?							
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).							
	17b.	Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.							
Part	3) (	Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)							
18.	Сор	y your total average monthly income from line 11.	\$1,433.51						
19.	Ded	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.							
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	-\$0.00						
	19b.	Subtract line 19a from line 18.	\$1,433.51						
20.	Calc	ulate your current monthly income for the year. Follow these steps:	\$1,433.51						
	20a.	Copy line 19b.	\$1,433.51						
		Multiply by 12 (the number of months in a year).	x 12						
	20b.	The result is your current monthly income for the year for this part of the form.							
		Copy the median family income for your state and size of household from line 16c.	\$17,202.12 \$72,429.00						
21.	How	do the lines compare?							
	₽ P	ine 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment eriod is 3 years. Go to Part 4.							
	ЦL c	ine 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The</i> ommitment period is 5 years. Go to Part 4.							
Part 4	S	gn Below							
	Ε	by signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.	nici karakan kara kalabah dalam perunak GAN dalam bahan 128. ,						
		× /s/ Christina Manzanales							
		Signature of Debtor 1 Signature of Debtor 2							
		Date 5/5/2016							
		MM/DD/YYYY  Date  MM/DD/YYYY							
	lf If	you checked 17a, do NOT fill out or file Form 122C-2. you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.							
·* • • • • • • • • • • • • • • • • • • •		The state of the s							